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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/296,031	04/21/1999	SUSAN A. LYONS PH.D.	D6218	7876

TITLE OF INVENTION: DIAGNOSIS AND TREATMENT OF NEUROECTODERMAL TUMORS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$650- 6(25	\$300	_\$9 50 965	11/13/2003
EXAMI	NER	ART UNIT	CLASS-SUBCLASS		•
CHEN, SE	IIN LIN	1632	424-001110		
CFR 1.363). ☐ Change of correspond Address form PTO/SB/I	nce address or indication of ence address (or Change of 22) attached. ion (or "Fee Address" Indic or more recent) attached. U	Correspondence	2. For printing on the patent of the names of up to 3 registere or agents OR, alternatively, (single firm (having as a men attorney or agent) and the name of the patent attorneys or a is listed, no name will be printed.	d patent attorneys 2) the name of a mber a registered ames of up to 2 gents. If no name	

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Robert I. Smyth-Red. No. 50.801

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